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Happy Thanksgiving

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Bremerton Opens New Physical Therapy Department

Judith Robertson, Public Affairs Officer

The ribbon was cut opening a new Physical Therapy Dept. in Naval Station Bremerton's Concourse Central, building #502, adjacent to the Fitness Pit, Oct. 13. The project combined two original, and costly plans into one, using resources from four principal players to create an ideal outcome, according to Cmdr. Dan Frederick, officer in charge of the Naval Hospital's Branch Medical Clinic on Puget Sound Naval Shipyard, who will run the facility. "Naval Station Bremerton, Puget



Sound Naval Shipyard, Naval Hospital Bremerton and its Branch Medical Clinic, PSNS, all benefited from this cooperation of effort, space, dollars and human resources," Frederick said. The clinic, staffed by one full-time Physical Therapist and two PT technicians, offers a range of services, such as those needed by orthopedic post operation patients or occupational health patients from the Branch Medical Clinic, PSNS. Additionally, the clinic now performs Physical Capacity Evaluations on all new

PSNS civilian hires.

"This is a perfect example of how the Navy is doing things smarter. It just took people talking to make this happen. It is a win-win situation," said Capt. Judy Holden, commanding officer of Naval Station Bremerton, whose contribution of the physical space was "prime real estate," according to Frederick. "Our task, at the Naval Hospital, was to improve access to care," said hospital Commanding Officer Capt. Gregg Parker. "I don't think we could have come up with a

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Navy Prevails in First Medical Olympics Army-Navy Games

Judith Robertson, NHB PAO



"The wounded on the battlefield are the clear winners today," said Force Master Chief, HMCM Mark Weldon, Navy Bureau of Medicine and Surgery. Weldon flew in from Washington, D.C., to experi-

ence the first Joint Combat Medical Olympics, Oct. 1, at Soldiers Field on the Ft. Lewis Army Base. Medical personnel in the military face a greater challenge than their civilian counterparts. Not only must they know the medical skills

that define their profession, but they must also be able to execute those skills in a combat situation. While each service tests itself constantly in the application of combat medicine, this joint competition served to

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Bremerton opens new Physical Therapy Department Cont.

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better solution, especially down here (referring to the space constraints on Naval Station Bremerton and the Puget Sound Naval Shipyard). With this facility, we can now provide care to almost as many patients here in a month as we do at the Naval Hospital."

According to Frederick, that figure will run between four to six hundred a month, depending on the ships in port as the new clinic

can provide physical therapy services for Naval Station Bremerton Sailors and Occupational Health services for PSNS civilian workers. "Both commands benefit from the close proximity of the clinic to their personnel. They will benefit from a significant decrease in lost production time with this 'deck plate' operation. It just makes for better business practices," Frederick said. "The resource sharing collaboration between Naval Hospi-

tal, Naval Station and PSNS, saved over \$250 thousand compared to the costs associated with the two original plans, Frederick said.

"This is actually a win-win-win situation," said PSNS Commanding Officer Capt. Greg Bryant. "Because everyone wins on this one."



Pain of JCAHO Worth it for Staff; Patients

Editorial, Chris Hober, NWLA

JCAHO - the initials might stand for "Jump in a Cave And Hide Out" as far as I'm concerned. It's the only time when staff located in some deep, dark area of the facility where nobody ever goes don't complain about it. Having been through a few JCAHO (JCAH) inspections, I've come to some conclusions: I'm glad this isn't an annual event; a six-month TDY to coincide with JCAHO preparation might be fun; and where did the press ever get the idea that these guys weren't thorough?

Let's face it - JCAHO is painful! It's like the hardest exam you ever crammed for, except that it's all of the hospital employees cramming for the same grade, which had BETTER be an A, by golly! It doesn't matter if you are a Red Cross Volunteer or paid staff, a clinician or an administrator, an OR tech or

a social worker, a contract housekeeper or a medical student, you will be part of your organizations' success or failure when JCAHO comes around.

And the minutiae! After enduring weeks of e-mail messages reminding you of every administrative practice to be followed and every fact to be remembered, it's a wonder that you can remember your name when the team comes calling. One is also left wondering about rules that seem arbitrary or silly. Why CAN'T I prop my door open, or does it REALLY matter that the patient sign-in sheet is left on the counter, or WHO CARES if I got every single item in my 6-part folder initialed? After considering all of the ways in which an organization can do badly however, one has to conclude that even the most seemingly trivial pursuits

are integral during a JCAHO inspection. As any lawyer will tell you, "the devil's in the details."

Which is why an exemplary JCAHO outcome is so important not just to the leadership, or to the organization's teaching programs, but to every single member of that organization's staff. It speaks not only to the quality of care, but to the quality of the individuals who are the organization. Some say what doesn't kill you makes you stronger. JCAHO not only makes you stronger - when you succeed, it makes you better, and most certainly prouder.

Since the results are not yet official, I can't tell you whether there were any findings, or just how well MAMC stood up under this round of JCAHO scrutiny. I can, however, share with

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Pain of JCAHO Worth it for Staff; Patients Cont.

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you the surveyor's feedback of organizational performance, which reads: *"This survey team considers this organization a role model for patient focused care. The history of their performance improvement activities reflects a successful integration of medical staff, nursing and administrative services. This is exemplified by the recent reduction in 142 beds throughout the facility while at the same time, enhancing the quality of patient care. The*

expertise, breadth, and depth of the medical staff and the dedication which they exhibit to patient care, education, and research is exemplary. The leadership is to be commended regarding the excellent care and maintenance of this hospital facility.

You will note that not a single word of this message was devoted to the beautiful modern Madigan complex, the superb landscaping, great view, or the state of the art medical equipment throughout the facility. The bricks, mortar, drywall, stainless steel, glass and plastic did nothing to deserve such accolades. That

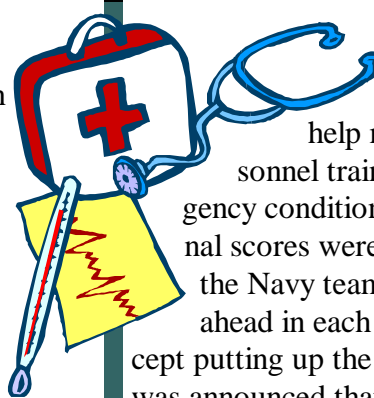
praise was deservedly reserved for every person, regardless of position, who really constitute Madigan Army Medical Center.

But in the end, it is Madigan patients who are the real winners. The JCAHO inspectors viewed every encounter here with this fundamental question in mind - Would I want to be a patient in this medical center? The answer by all of the reviewers was a resounding YES on every day in every section of the medical center. THAT is ultimately the reason why all the pain of JCAHO is well worth it, once you succeed.

Navy Prevails in First Medical Olympics Army-Navy Games Cont.

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hone skills as it pitted Navy Hospital Corpsmen from Naval Hospital, Bremerton with Army Medics from Madigan Army Medical Center. And when the dust settled Oct. 1, the Navy Corpsmen brought home the trophy. The contest offered challenges from the cerebral to the physical as the teams challenged each other in a 28-question written exam and a five-station, one-and-a-half mile Combat Casualty Obstacle Course. Other events included Field CPR (cardiopulmonary resuscitation), erecting a small general-purpose tent, and creating realistic mou-



lage (the fake wounds that help medical personnel train for emergency conditions). The final scores were close. But the Navy team pulled ahead in each category, except putting up the tent. When it was announced that the Navy came in only a few seconds behind the Army in the tent construction, one Army team member was heard to say, "I didn't even know the Navy knew what a tent was."

"We had to borrow the tent from Madigan to practice with it," said Navy team captain, Lt.j.g. Shawn Kase, NC, USNR. Kase, who volunteered for the

job as team captain, said he did so because "it sounded like fun." But, he said, there's a very serious side to this friendly competition.

"It may seem like fun and games, but it prepares you for actual combat. It's the best way to get you to think and react rapidly. You have to find the patient, assess and treat them and then carry them out," Kase said, and then added, "Without killing them, or you loose points."

"This is what we're all about," said Sgt. 1st Class Ronald Polite, LPN, USA, from "A" Company at MAMC. "This may stir up a lot of competition, but it's good training. When were working up at the big house

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Navy Prevails in First Medical Olympics Army-Navy Games Cont.

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(Madigan hospital) we miss this. This is hands-on training. This is what we're here for and what we train for. And today is a real treat.

The age-old rivalry between these services may have mellowed, but the adrenaline rush that accompanies competition was evident. Hospital Corpsman 2nd Class David Edwards eyed the Army team in the opening ceremony, "I was concerned. I thought they looked like a pretty well conditioned unit." "I was really intimidated," said Hospital Corpsman 2nd Class, Heidi Newman, speaking of the Army team. "I looked over at them and said, 'oh, no!' They were big, tall and tough looking; it was cold and they were standing out there with just t-shirts. But when we formed up, we were very disciplined, at attention and really a team, you could feel it. I think we psyched them out a little."

Out of the 16-member team, names were drawn randomly to see who participated in which of the five events. Hospital Corpsman 1st Class Guillermo Venegas, Leading Petty Officer for Nursing Services, who was assigned to the Naval Hospital only a short time before practice began, said he wanted to do something for his new command.

"I had been involved in casu-

alty exercises before, but this sounded more hands-on and I thought it would be good to have a little friendly competition between services," he said.

The friendly competition turned to a grueling experience when Venegas was one of the five team members selected for the obstacle course. Four members of the team ran the mile-and-a-half course carrying a litter bearing a 150-pound dummy and all members wore 25 pound packs. The fifth member of the team was able to spell the litter bearers on a rotating basis and carry other members gear for them. The course had them running through a stream, along a very narrow pathway and through the Pacific Northwests famous blackberry brambles. At each of five "stations" injured patients were discovered, that needed to be triaged and treated appropriately. "It was an intense experience. We learned to work as a team in that mile-and-a-half. I was especially proud of the way our junior corpsmen performed. Their attitude and their commitment was outstanding," Venegas said.

The gleaming, two-foot rotating trophy with the engraved plaque showing the Naval Hos-



pital team as the first winner is the public reward, but the team members said they gained something greater.

"Working with this team was the most fulfilling part," Dahlberg said. "We pushed each other, encouraged each other, listened to each others ideas and chose the one that made sense. I learned that no matter where you are in the Navy, or what your rank is, you all come together for a common goal." "And the camaraderie," Edwards said. "There is something pretty unique about pulling a team together from different areas in the hospital, saying 'this is your goal, you can do it,' -- and then watching them do it. It's very rewarding. We didn't have any individuals on our team. Just a great team."

Winning team members are: (Team Capt) Lt.j.g. Shawn Kase, HM2 Orlando Aldana, Lt. Rodger Christy, HN Amber Dahlberg, HM2 David M. Edwards, HM3 Tracie Fout, HM1 Sheri Howard, HA Christian Lonzon, HN Brian Murray, HM2 Heidi Newman, HN Hector Reyes, HM1 Guillermo Venegas, HM3 Michael Watson, HM2 Michael Westland, HN Cameron Wink, and HN Estaban Rivera.